



Stigma related to illicit drug use: Impact on health and community safety

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ABSTRACT

Public discourse on illicit drug use is frequently characterized by hostility, blame and stigma. This article examines how that stigma is produced and sustained, particularly through dehumanizing portrayals and the positioning of people who use drugs as outsiders. It reviews research on how this creates harm, including hindering effective treatment and isolating families from support. The article also summarizes the impact of stigma on employment and community cohesion, potentially exacerbating crime and further drug use. Drawing on interdisciplinary theory and contemporary policy evidence, an argument is presented for a shift from punitive responses toward more empathic, evidence-based harm reduction. It identifies cross-sector partnership and lived-experience involvement as practical enablers of more effective approaches to reducing drug-related harm.

Key Words Stigma; media; drug policy; punitive; treatment engagement; harm reduction.

INTRODUCTION

When considering “kindness” in community safety work, Taylor (2025) called for a commitment to delivering evidence-based solutions for those most marginalized, even in the face of hostile and misinformed pressures.

This social innovation narrative answers that call in relation to illicit drug use. It argues that kindness is a concept that rarely appears in political or public discourse on drug use. Neither is it a particularly salient feature within drug policy. The article considers the impact this has, including on drug users themselves, their families and wider society. It also explores ways in which a different approach can be promoted. Given the fact that drug-related mortality has more than doubled globally in the last three decades (Liu et al., 2025), a different approach is surely needed.

PORTRAYALS OF DRUG USERS

The starting point for a lack of compassion and empathy toward illicit drug users is their characterization as intrinsically “different” from the rest of us. They are portrayed as alien to wider society, placing them outside the dominant social norm. In this way, drug users are framed as enemy combatants in a “war on drugs” that has so often formed the

philosophical basis for political discourse and policy making (Guilamo-Ramos et al., 2025).

Analyses of media portrayals of illicit drug users have found that they regularly reinforce negative stereotypes. Drug users are framed as dangerous and aggressive, or as unreliable and unstable. Dehumanizing language in news articles is also common, often linked to both the criminalization of people who use drugs as well as and in-group/out-group dynamics (Bosworth et al., 2025).

These negative portrayals will often be justified as an act of “protection.” Media outlets may see themselves as doing society a service by warning against an outside threat. Drug users are framed as prone to committing crime or other forms of harm against children, older people or other groups that people are instinctively motivated to defend.

HARM TO INDIVIDUALS AND FAMILIES

Stigmatizing narratives do little to protect society and often have the opposite effect. For example, hostility and prejudice around illicit drug use can hinder effective treatment. In their study, Luderer et al. (2026) found stigma led nearly half of participants to withhold disclosure of substance use, while approximately one-third avoided much-needed medical treatment and over a quarter discontinued treatment altogether.

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Similarly, Admase et al. (2025) reported that perceived stigma posed significant barriers to consistent treatment engagement and that this stigma was felt most intensely by women.

Research also suggests that perceived stigma among drug users in medical settings is not simply imagined. The reality is that health professionals often have low regard for patients who use illicit drugs, with over half in one study saying they “prefer not to work with patients with substance use” (Mendiola et al., 2018). This stigma even extends to substance misuse treatment providers and their attitudes toward providing the most effective medical interventions (Dickson-Gomez et al., 2022).

The impact of hostility and prejudice around illicit drug use extends beyond the user themselves. It also affects their families and others close to them. This has been described as “courtesy stigma” and can lead to isolation and poor mental health among families and friends (Jones et al., 2024). Parents of drug users frequently report experiencing stigma and blame, leaving them feeling judged and alone (O’Dowd et al., 2025). Stigma is even felt after parents are bereaved following a drug-related death of a child (Titlestad et al., 2021).

HARM TO SOCIETY

The impact of hostile attitudes to drug users also has an adverse impact on wider society. For example, previous research with employers has found almost two-thirds would not employ people with a history of illicit drug use even if they were fit for the job. Former drug users have even reported having job offers withdrawn once their previous drug use became known (UK Drug Policy Commission, 2010). Having people who are well able to work left excluded from employment because of a history of drug use can only harm society and the economy. Especially if unemployment reduces the motivation or ability of those individuals to remain in recovery and function positively in society.

Society also suffers the impact of hostility to drug users through its impact on inequality and social cohesion. Lindsay and Vulolo (2021) found that media coverage more often focused on criminalization and vilified Black people who use drugs, while framing drug use among white people as a medical issue and adopting a more humanizing stance.

Other research has shown that “stop and search” for drugs are disproportionately carried out by racial background to a greater degree than for other suspected offences (Shiner et al., 2018). Given that “stop and search” practices have the potential to damage trust in the police and result in increased offending behaviour (Murray et al., 2021), this has the potential to have an impact not only on racialized minorities, but cohesion and crime rates across entire communities.

POWER AND DIVISION

For a full understanding of the prejudice and hostility that surrounds illicit drug use, it is not enough to simply acknowledge that it impacts adversely on individuals, families and wider communities. It is also important to consider who benefits from the hostility.

Drawing on literatures spanning public health, political economy, sociology and social psychology, Friedman et al. (2022) frame drug-related prejudice and hostility as existing

within a system of “divide and rule.” They argue that it exemplifies “how subordination and stigmatization create structural and cultural divides that make it easy to create or perpetuate disunity and subordination.” In that way, the stigma applied to drug users, even when seeking treatment, operates as a strategy of sociopolitical domination, whereby powerful groups divide and marginalize subordinate populations to sustain economic and political advantage.

Friedman et al. also argue that, given the potential for this stigma to act as an obstacle to effective public health intervention, it is crucial that its roots and potential benefits to powerful forces in society are openly acknowledged. This view is reflected by Taylor (2025) who warns against falling for a “sleight of hand, misdirecting us to just accept and toil away under empirically bad public policy.”

PUNITIVE VERSUS HARM REDUCTION APPROACHES

In the context of illicit drug use, the “bad policy” referred to by Taylor would include any that maintains a demonstrably unsuccessful approach despite the availability of other, more effective strategies. Extensive international evidence demonstrates that approaches dominated by punitive action, characterized by harsh enforcement-led responses and incarceration, do not reduce the harm caused by drugs (Global Commission on Drug Policy, 2024).

In contrast, evidence has accumulated on the benefits of less punitive harm reduction interventions. These include substitute medication, drug testing, naloxone-based fatal overdose prevention and overdose prevention centres (Pridgen et al., 2025). Despite this, there is concern that support for a harm reduction approach is declining due to increasingly prevalent “tough on crime” political messaging (Guilamo-Ramos et al., 2025).

Better promotion of harm reduction approaches may be achieved through effective, cross-sector partnership. The issue of illicit drug use sits on the fault lines of community safety and healthcare, simultaneously being a public health issue and a prominent factor in criminal justice work. Where interdisciplinary alignment is strong, partners can coordinate prevention, treatment and community safety actions rather than running parallel, disjointed plans.

In the UK, for example, Community Safety Partnerships are statutory bodies established under the Crime and Disorder Act 1998 tasked with aligning strategies on issues such as illicit drug use. Members typically include police, local authorities, probation services and public health professionals. Many of these partnerships have delivered extensive work aimed at reducing the harm of illicit drug use through a harm reduction approach. For example, in Worcestershire in the UK, joint working has doubled the successful engagement of people leaving prison in substance misuse treatment services through a partnership between public health services, prisons and probation (Russell, 2024).

Another key enabler of a more empathic and effective approach to illicit drug use is the involvement of those with lived experience. This often takes the form of peer recovery support services (PRSS) which include mentoring, education and support delivered by individuals with lived experience of drug use and recovery. A recent systematic review found

that PRSS are particularly effective in improving treatment linkage and engagement. This is likely to be because peers are uniquely positioned to establish credibility and foster rapport and trust with those needing substance misuse support, which in turn can increase willingness to accept treatment recommendations and remain engaged during challenges (Eddie et al., 2019).

CONCLUSION

A harsh and stigmatizing mindset does not just fail drug users, but also their families and wider society. While a call for more kindness and compassion in relation to illicit drug use may sometimes attract derision and opposition, it may be that this is exactly what we need more of. The evidence indicates that we need less punitive measures and a greater focus on harm reduction, partnership and lived experience. Without that, the traditional “tough” approach to drugs will continue to be “weak” in relation to positive outcomes.

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